



I want to be a part of the team that is supporting NAAREF and its programs for the industry's future. These programs include PAASS®, the industry's premier safety program, Operation S.A.F.E.®, Compaass Rose®, and other educational and safety programs. Together, we can ensure a role for aerial application in the production of America's food and fiber.



Here is my *tax-deductible* contribution!

- | | | |
|---------------------------------------|----------------------------------|--|
| <input type="checkbox"/> Over \$5,000 | <input type="checkbox"/> \$5,000 | <input type="checkbox"/> \$2,500 |
| <input type="checkbox"/> \$1,000 | <input type="checkbox"/> \$500 | <input type="checkbox"/> \$250 |
| <input type="checkbox"/> \$100 | <input type="checkbox"/> \$50 | <input type="checkbox"/> Any amount is appreciated |

My credit card information or a check (payable to NAAREF) in the amount of \$ _____ is enclosed.

Name _____

Company _____

Address _____

City _____ State _____ Zip Code _____

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All contributions are tax deductible

Mail Completed Donation Form to:

NAAREF

1440 Duke Street

Alexandria, VA 22314

Phone 202-546-5722

METHOD OF PAYMENT:

- Check Money Order Credit Card

Name on Card: _____

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